

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SW</i>	<i>68904</i>	<i>11/13/00</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>11-8-00</i>
FORMALITY REVIEW		<i>71435</i>	<i>11/23/00</i>
RESPONSE FORMALITY REVIEW	<i>MD</i>	<i>50911</i>	<i>08/02/01</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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